

Short-Term Medical Plan Comparison

	Assurant	Anthem
Length of Coverage	30-365 days	30-180 days
Deductibles Offered	\$250, \$500, \$1,000, \$2,500, or \$5,000	<ul style="list-style-type: none"> Ind.: \$250, \$500, \$1,000, \$2,500, or \$5,000 Family: \$750, \$1,500, \$3,000, \$7,500, or \$15,000
Coinsurance Options	<ul style="list-style-type: none"> 100/0 with \$1,000 or higher deductible 80/20 to \$5,000 (per person) 50/50 to \$5,000 (per person) 	<ul style="list-style-type: none"> 80/20 to \$5,250, \$5,500, \$6,000, \$7,500, or \$10,000 (2x for family)
One Family Deductible	If a \$500 and up deductible is selected, only one deductible needs to be satisfied by all covered family members.	N/A
Maximum Benefit	\$2,000,000	\$1,000,000
Type of Payment	Single or monthly	Single pay only
Payment Method	Check, credit card, or auto debit from checking or savings account	Check or credit card
Offers a Second Term	Yes, must re-apply	Yes, must re-apply
Move Out of State	Continue Coverage	Terminate Coverage
Plan Benefits	<ul style="list-style-type: none"> Inpatient services Outpatient services Semi-private room Intensive care Lab X-ray Ambulance Prescription drugs 	<ul style="list-style-type: none"> Inpatient services Outpatient services Semi-private room Intensive care Lab X-ray Ambulance Prescription drugs Home care visits Skilled nursing care
Major Exclusions*	<ul style="list-style-type: none"> Pregnancy or childbirth Routine physical exams Routine well child care Mental illness Weight loss programs Hearing and eye exams Fertility treatments 	<ul style="list-style-type: none"> Pregnancy or childbirth Routine physical exams Routine well child care Mental illness Weight loss programs Hearing and eye exams Fertility treatments

*Please see the individual plan brochures for additional information, exclusions and rates.

For questions and more information contact, Chelle Walton at 800-362-7121 or cwalton@wha.org.



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